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Bib Data Sheet

CONFIRMATION NO. 6687

<b>SERIAL NUMBER</b> 09/956,980	<b>FILING DATE</b> 09/21/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 0609.4550001/JAG/FRC	
<b>APPLICANTS</b> Ashley I. Bush, Somerville, MA; Xudong Huang, Cambridge, MA; Craig S. Atwood, Somerville, MA; Rudolph E. Tanzi, Canton, MA;					
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 09/038,154 03/11/1998 PAT 6,323,218					
<b>** FOREIGN APPLICATIONS *****</b> NONE					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> ** 10/15/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>X. [Signature]</u> <u>SE</u> Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 58	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> 26111					
<b>TITLE</b> Agents for use in the treatment of alzheimer's disease					
<b>FILING FEE RECEIVED</b> 524	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. o <sup>e</sup> time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		